

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 1098 OF 1115  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00053553	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>Eagle Arms Productions, LLC</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address 9331 Hamilton Blvd.		Amount 55.00	
City Brieningsville	State PA	Zip Code 18031	Transaction ID : 61218780
Purpose of Expenditure Booth Rental	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 11 / 2014	
Name of Federal Candidate Ryan Costello	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	<input checked="" type="checkbox"/> House District: 06 State: PA
Calendar Year-To-Date Per Election for Office Sought	3172.43	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>Great Southern Gun &amp; Knife Show, LLC</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 16 / 2014	
Mailing Address 1823 Blue Crane Lane		Amount 85.00	
City Knoxville	State TN	Zip Code 37922	Transaction ID : 61218773
Purpose of Expenditure Independent Expenditure - Booth Rental	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 11 / 2014	
Name of Federal Candidate Sen. Mary Landrieu	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	<input type="checkbox"/> House District: _____ State: LA
Calendar Year-To-Date Per Election for Office Sought	795.16	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		140.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014	